

## Special Waste Acceptance Criteria

<p>«County»      «Permit_»</p> <p>«Responsible_Official_»</p> <p>«Facility»</p> <p>«Address_»</p> <p>«City», «State» «Zip»</p> <p><i>Please make address corrections as necessary</i></p>	<p>Send completed form to: Sue Johnson Solid Waste Planning and Permitting Section 502 East Ninth Street Des Moines, Iowa 50319-0034</p>
<p><b>SPECIAL WASTE CURRENTLY ACCEPTED.</b> Please provide information regarding special waste this facility is currently accepting for final disposal. Provide details for requirements for accepting and off-loading each special waste. <b>NOTE:</b> Completion of this form requires reference to Iowa Administrative Code 567-109. Please type or print in ink.</p>	
SWA Number	SWA Acceptance and Management Description

**Questions? Call or email:**

Sue Johnson, Environmental Specialist, [susan.johnson@dnr.state.ia.us](mailto:susan.johnson@dnr.state.ia.us) (515) 281-7982  
Becky Jolly, Statistical Research Analyst, [becky.jolly@dnr.state.ia.us](mailto:becky.jolly@dnr.state.ia.us) (515) 281-8308


**If more room is needed, please follow the provided format and attach additional sheets.**

### CERTIFICATION

I certify under penalty of law that I am the owner, operator, or authorized representative of the owner or operator and that I have examined and am familiar with the information reported above, and that I believe the information is true, accurate and complete.

<b>Signature</b>	<b>Name &amp; agency of Person Certifying (please type or print)</b>	<b>Date</b>	<b>Telephone Number</b>
<b>Email:</b>			<b>Fax:</b>

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